COUNTY OF SAN DIECO MOTTE						
COUNTY OF SAN DIEGO - WKITI	COUNTY OF SAN DIEGO - WRITTEN DISCLOSURE					
(PURSUANT TO SECTION 1000.1 OF THE SAN DI	11:	(Clerk's Use Only - Date and Time Stamp)				
FILER INFORMATION: (Please type or print in			OF SAN DEGO F BUFFAVOSORS			
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(NAME OF CONTRACTOR [INDIVIDUAL OR ENTI		73394 3000	1 70 450			
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		· CLERK (H TIH BOARD			
(CONTRACTOR) LOBBYIST (Check one)		A441 2/A				
SUPPLEMENTAL FORM (Check if pres	enting at Board of Supv. Mtg.)					
DISCLOSURE COVERS PERIOD FROM 08	-01-08 TO 07-31-04	Board Mts	r. Date: 8-18	-04		
(Disclosure must cover the year preceding the date of the disclosure)			Board Mtg. Date: 8-18-04 Agenda Item: 14			
	,	Communic	cation Rec'd.:			
NAME AND ADDRESS OF CONTRACTOR:						
4740 Ruffmer St. Son Drego CA 92111			County Department Contact:			
4 140 RUTMIN ST. SA DIEGO CA MAITI			Name			
ADDRESS OF REGISTERED LOBBYIST (IF	APPLICABLE)	Departmen	Department			
···· · (Phone: (
		rnone. ()	•		
REPORTABLE DISCLOSURE: (Check Yes	s or No below)					
NEC TO TRANSPOR						
YES If you HAVE gifts a	and/or contributions to report, p	lease complete	e Sections A and/	or B, as		
applicable, and Sec	ctions C, D, and E					
(NO) If you have NO gift	ts and NO contributions to war a	41	1.4. C 41 D			
	s and NO contributions to repor	t, piease comp	nete Section D an	a E only		
A. REPORTABLE DISCLOSURE - GIFTS *	(AGGREGATING \$50.00 OR MORE)					
NAME OF RECIPIENT	NAME & TITLE OF DONOR		_			
(Name of Board Member or immediate		DATE OF	DESCRIPTION	AMOUNT/		
family member)		GIFT	OF GIFT	VALUE		
* * *						
* Allach additional pages it necessary						
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	GN CONTRIBUTIONS * (ANY AMOUN	NT)				
B. REPORTABLE DISCLOSURE - CAMPAI		NT)				
B. REPORTABLE DISCLOSURE - CAMPAI NAME OF RECIPIENT (Name of Board Mem	ber NAME & TITLE OF		DATE OF			
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COUNTY OF SAN DIEGO - WRITTEN DISCLOSURE (PURSUANT TO SECTION 1000.1 OF THE SAN DIEGO COUNTY CHARTER)

FILER INFORMATION: (Please type or				. 1 .	, , , , , , , , , , , , , , , , , , ,	
(NAME OF CONTRACTOR [INDIVIDUAL (OR ENTITY] O	REGISTERED LOBBYI	ST)	N/f	-1	
Additional Page:						
A. REPORTABLE DISCLOSURE -	GIFTS (AGG	gregating \$50.00 or m	IORE)			
NAME OF RECIPIENT (Name of Board Member or immediate family member)		TITLE OF DONOR	DATE OF G	IFT	DESCRIPTION OF GIFT	AMOUNT/ VALUE
· .					·	
				<u></u>		<u> </u>
B. REPORTABLE DISCLOSURE - C		ONTRIBUTIONS (ANY	' Amount)			
NAME OF RECIPIENT (Name of Board Member or Controlled Committee receiving campaign contribution)		NAME & TITLE OF CONTRIBUTOR		l .	DATE OF NTRIBUTION	AMOUNT
				· · · · · ·		·

New: 01/10/01